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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted
with Initial Filing

OR

☐ Declaration Submitted after Initial
Filing (surcharge (37 CFR 1.16(e))
required)

Attorney Docket Number	H0004359
First Named Inventor	Jason Gratton et al.
COMPLETE IF KNOWN	
Application Number	
Filing Date	Filed concurrently herewith
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ABLATIVE COMPOSITE ASSEMBLIES AND JOINING METHODS THEREOF

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) _____ as United States Application Number or PCT International

Application Number _____ and was amended on _____ (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

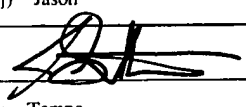
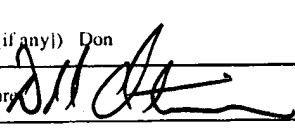
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please type a plus sign (+) inside this box →

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032
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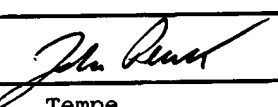
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
DECLARATION — Utility or Design Patent Application					
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000128 OR <input type="checkbox"/> Correspondence address below					
Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) Jason		Family Name or Surname: Gratton			
Inventor's Signature 				Date 7-28-03	
Residence: City Tempe		State AZ		Country US	Citizenship US
Mailing Address					
Mailing Address 1300 W. Warner Rd.					
City Tempe		State AZ		ZIP 85284-2896	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) Don		Family Name or Surname: Christensen			
Inventor's Signature 				Date 7-28-03	
Residence: City Tempe		State AZ		Country US	Citizenship
Mailing Address					
Mailing Address 1300 W. Warner Rd.					
City Tempe		State AZ		ZIP 85284-2896	Country US
X Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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PTO/SB/02A (05-03)
Approved for use through 04/30/2003. OMB 0851-0032
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet	Page ____ of ____
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
John		Perek	
Inventor's Signature 		Date 8/29/03	
Residence: City	Tempe	State	AZ
		Country	US
Citizenship			
Mailing Address			
1300 W. Warner Rd.			
Mailing Address			
City	Tempe	State	AZ
		Zip	85284
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.